

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Nebraska Leadership PAC

ADDRESS (number and street)

P.O. Box 3325

☐Check if different
than previously
reported. (ACC)

Omaha

NE

68103

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00366419

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☒July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post -Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

04

01

2007

through

06

30

2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Kim Robak

Signature of Treasurer

Electronically Filed by Kim Robak

Date

07

11

2007

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only							
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FEC FORM 3X
(Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Nebraska Leadership PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	4	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 Y Y Y Y 2007		98931.50
(b) Cash on Hand at Beginning of Reporting Period	72305.50	
(c) Total Receipts (from Line 19)	60000.00	64000.00
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	132305.50	162931.50
7. Total Disbursements (from Line 31)	41794.13	72420.13
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	90511.37	90511.37
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name
Nebraska Leadership PAC

Report Covering the Period:

From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	7

To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	60000.00	64000.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5)	60000.00	64000.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	60000.00	64000.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	60000.00	64000.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	22794.13	29620.13
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	22794.13	29620.13
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	11000.00	31500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	8000.00	11300.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	41794.13	72420.13
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	41794.13	72420.13

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	60000.00	64000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	60000.00	64000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	22794.13	29620.13
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	22794.13	29620.13

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 / 19

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Nebraska Leadership PAC

Full Name (Last, First, Middle Initial)

A. Allstate Insurance Company PAC

Mailing Address 2775 Sanders Road

City State Zip Code
 Northbrook IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 6 / 1 3 / 2 0 0 7

Transaction ID: 70711.C142

Amount of Each Receipt this Period

2500.00

Receipt

Full Name (Last, First, Middle Initial)

B. American Hospital Assn. PAC

Mailing Address 325 7th St NW

City State Zip Code
 Washington DC 20004-2818

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 6 / 2 5 / 2 0 0 7

Transaction ID: 70711.C155

Amount of Each Receipt this Period

5000.00

Receipt

Full Name (Last, First, Middle Initial)

C. American Optometric Assn. PAC

Mailing Address 1505 Prince St., Suite 300

City State Zip Code
 Alexandria VA 22314

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 6 / 2 5 / 2 0 0 7

Transaction ID: 70711.C154

Amount of Each Receipt this Period

5000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

12500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 / 19

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Nebraska Leadership PAC

A. Full Name (Last, First, Middle Initial)
Astra Zeneca PAC
Mailing Address 1800 Concord Pike

City State Zip Code
Wilmington DE 19850

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 5 / 2 0 0 7

Transaction ID: 70711.C151

Amount of Each Receipt this Period

5000.00

Receipt

B. Full Name (Last, First, Middle Initial)
Eli Lilly & Company PAC
Mailing Address Lilly Corporate Center

City State Zip Code
Indianapolis IN 46285-1200

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 5 / 2 0 0 7

Transaction ID: 70711.C149

Amount of Each Receipt this Period

2500.00

Receipt

C. Full Name (Last, First, Middle Initial)
GlaxoSmithKline PAC
Mailing Address Five Moore Drive
Research Triangle Park

City State Zip Code
Durham NC 27709

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 5 / 2 0 0 7

Transaction ID: 70711.C145

Amount of Each Receipt this Period

5000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

12500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Nebraska Leadership PAC

A.

Full Name (Last, First, Middle Initial)

IBEW PAC

Mailing Address 900 7th St. NW

City

Washington

State

DC

Zip Code

20011-2713

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 5 / 2 0 0 7

Transaction ID: 70711.C150

Amount of Each Receipt this Period

2500.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Johnson & Johnson PAC

Mailing Address One Johnson & Johnson Plaza

City

New Brunswick

State

NJ

Zip Code

08933-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 5 / 2 0 0 7

Transaction ID: 70711.C156

Amount of Each Receipt this Period

2500.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Medco Health PAC

Mailing Address 591 Redwood Hwy.
Bldg. 4000

City

Mill Valley

State

CA

Zip Code

94941

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 3 1 / 2 0 0 7

Transaction ID: 70711.C141

Amount of Each Receipt this Period

5000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

10000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 / 19

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Nebraska Leadership PAC

A. Full Name (Last, First, Middle Initial)
National Cable & Telecommunications PAC

Mailing Address 25 Massachusetts Ave. NW
Suite 100

City State Zip Code
Washington DC 20001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 5 / 2 0 0 7

Transaction ID: 70711.C148

Amount of Each Receipt this Period

5000.00

Receipt

B. Full Name (Last, First, Middle Initial)

Nelnet Higher Education Access PAC

Mailing Address 1726 M St. NW, Suite 701

City State Zip Code
Washington DC 20036

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 5 / 2 0 0 7

Transaction ID: 70711.C143

Amount of Each Receipt this Period

5000.00

Receipt

C. Full Name (Last, First, Middle Initial)

Pfizer PAC

Mailing Address 235 East 42nd St.

City State Zip Code
New York NY 10017

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 2 5 / 2 0 0 7

Transaction ID: 70711.C152

Amount of Each Receipt this Period

2500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

12500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 19

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Nebraska Leadership PAC

Full Name (Last, First, Middle Initial)

A. Pharmaceutical Research &

Mailing Address Manufacturers of America PAC
 1100 15th St. NW

City State Zip Code
 Washington DC 20005

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 6 / 2 5 / 2 0 0 7

Transaction ID: 70711.C146

Amount of Each Receipt this Period

2500.00

Receipt

Full Name (Last, First, Middle Initial)

B. Schering-Plough Corp. PAC

Mailing Address 1130 Connecticut Ave. NW
 Suite 500

City State Zip Code
 Washington DC 20036

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 6 / 2 5 / 2 0 0 7

Transaction ID: 70711.C144

Amount of Each Receipt this Period

5000.00

Receipt

Full Name (Last, First, Middle Initial)

C. The Travelers Companies, Inc. PAC

Mailing Address One Tower Square

City State Zip Code
 Hartford CT 06183

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 0 6 / 2 5 / 2 0 0 7

Transaction ID: 70711.C153

Amount of Each Receipt this Period

5000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

12500.00

TOTAL This Period (last page this line number only)

60000.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 / 19

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Nebraska Leadership PAC

Full Name (Last, First, Middle Initial)

A. Schimanski & Associates

Mailing Address 420 C Street NE

City Washington State DC Zip Code 20002-2705

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70409.E150

Date of Disbursement

04 / 08 / 2007

Amount of Each Disbursement this Period

2500.00

FUNDRAISING CONSULTING

Full Name (Last, First, Middle Initial)

B. Schimanski & Associates

Mailing Address 420 C Street NE

City Washington State DC Zip Code 20002-2705

Purpose of Disbursement
REIMBURSEMENT:SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70711.E154

Date of Disbursement

04 / 16 / 2007

Amount of Each Disbursement this Period

223.71

REIMBURSEMENT:SEE BELOW

Full Name (Last, First, Middle Initial)

C. Charlie Palmer Steakhouse

Mailing Address 101 Constitution Ave. NW

City Washington State DC Zip Code 20001-

Purpose of Disbursement
FUNDRAISER LUNCH

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70711.E155

Date of Disbursement

04 / 16 / 2007

Amount of Each Disbursement this Period

223.71

[MEMO ITEM]
MEMO: FUNDRAISER LUNCH

SUBTOTAL of Disbursements This Page (optional)

2723.71

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 / 19

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Nebraska Leadership PAC

Full Name (Last, First, Middle Initial)

A. Schimanski & Associates

Mailing Address 420 C Street NE

City Washington State DC Zip Code 20002-2705

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70711.E159

Date of Disbursement

05 / 02 / 2007

Amount of Each Disbursement this Period

2500.00

FUNDRAISING CONSULTING

Full Name (Last, First, Middle Initial)

B. Schimanski & Associates

Mailing Address 420 C Street NE

City Washington State DC Zip Code 20002-2705

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70711.E160

Date of Disbursement

06 / 01 / 2007

Amount of Each Disbursement this Period

2500.00

FUNDRAISING CONSULTING

Full Name (Last, First, Middle Initial)

C. Schimanski & Associates

Mailing Address 420 C Street NE

City Washington State DC Zip Code 20002-2705

Purpose of Disbursement
REIMBURSEMENT:SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70711.E172

Date of Disbursement

06 / 26 / 2007

Amount of Each Disbursement this Period

9195.42

REIMBURSEMENT:SEE BELOW

SUBTOTAL of Disbursements This Page (optional)

14195.42

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Nebraska Leadership PAC

A. Full Name (Last, First, Middle Initial) CWS of Omaha, Inc.		Transaction ID: 70711.E174 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 3 0 / 2 0 0 7</div> </div>
Mailing Address 5010 Dodge		Amount of Each Disbursement this Period <div>625.00</div>
City Omaha State NE Zip Code 68132-		
Purpose of Disbursement CWS TICKETS	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: CWS TICKETS
B. Full Name (Last, First, Middle Initial) Mutual of Omaha		Transaction ID: 70711.E175 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 3 0 / 2 0 0 7</div> </div>
Mailing Address Federal Government Affairs Office 1201 Pennsylvania Ave. NW, #300		Amount of Each Disbursement this Period <div>216.00</div>
City Washington State DC Zip Code 20004-		
Purpose of Disbursement CWS TICKETS	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: CWS TICKETS
C. Full Name (Last, First, Middle Initial) Bistro Bis		Transaction ID: 70711.E176 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 3 0 / 2 0 0 7</div> </div>
Mailing Address 15 E St. NW		Amount of Each Disbursement this Period <div>1118.03</div>
City Washington State DC Zip Code 20004-		
Purpose of Disbursement FUNDRAISING EXPENSE	<div>Category/Type</div>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: FUNDRAISING EXPENSE

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
Nebraska Leadership PAC

Full Name (Last, First, Middle Initial)

A. Omaha Prime

Mailing Address 415 S 11th St.

City Omaha State NE Zip Code 68102-

Purpose of Disbursement
FUNDRAISING EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70711.E177

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2505.61

[MEMO ITEM]

MEMO: FUNDRAISING EXPENSE

Full Name (Last, First, Middle Initial)

B. Attitude on Food

Mailing Address 3025 Farnam St.

City Omaha State NE Zip Code 68131-

Purpose of Disbursement
FUNDRAISING EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70711.E178

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2308.54

[MEMO ITEM]

MEMO: FUNDRAISING EXPENSE

Full Name (Last, First, Middle Initial)

C. Schimanski & Associates

Mailing Address 420 C St. NE

City Washington State DC Zip Code 20002-

Purpose of Disbursement
TRAVEL & SUBSISTENCE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70711.E173

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1323.76

[MEMO ITEM]

MEMO: TRAVEL & SUBSISTENCE

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Nebraska Leadership PAC

Full Name (Last, First, Middle Initial)

A. Schimanski & Associates

Mailing Address 420 C Street NE

City Washington State DC Zip Code 20002-2705

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70711.E169

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

FUNDRAISING CONSULTING

Full Name (Last, First, Middle Initial)

B. Nebraska Democratic Party

Mailing Address 1327 H St.

City Lincoln State NE Zip Code 68502-

Purpose of Disbursement
FUNDRAISER TICKETS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70711.E167

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1500.00

FUNDRAISER TICKETS

Full Name (Last, First, Middle Initial)

C. Federal Election Commission

Mailing Address PO Box 979058

City St. Louis State MO Zip Code 63197-

Purpose of Disbursement
FINE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70711.E163

Date of Disbursement

/ /

Amount of Each Disbursement this Period

900.00

FINE

SUBTOTAL of Disbursements This Page (optional)

4900.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Nebraska Leadership PAC

A. Full Name (Last, First, Middle Initial) Diane Brock		Transaction ID: 70711.E161 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 1 / 2 0 0 7</div> </div>	
Mailing Address 4418 Pacific		Amount of Each Disbursement this Period <div> <div></div> <div>300.00</div> </div>	
City Omaha State NE Zip Code 68105-	Purpose of Disbursement BOOKKEEPING SERVICE Candidate Name	<div>Category/Type</div>	BOOKKEEPING SERVICE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
B. Full Name (Last, First, Middle Initial) Diane Brock		Transaction ID: 70711.E162 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 3 1 / 2 0 0 7</div> </div>	
Mailing Address 4418 Pacific		Amount of Each Disbursement this Period <div> <div></div> <div>300.00</div> </div>	
City Omaha State NE Zip Code 68105-	Purpose of Disbursement BOOKKEEPING SERVICE Candidate Name	<div>Category/Type</div>	BOOKKEEPING SERVICE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
C. Full Name (Last, First, Middle Initial) Diane Brock		Transaction ID: 70711.E179 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 3 0 / 2 0 0 7</div> </div>	
Mailing Address 4418 Pacific		Amount of Each Disbursement this Period <div> <div></div> <div>300.00</div> </div>	
City Omaha State NE Zip Code 68105-	Purpose of Disbursement BOOKKEEPING SERVICE Candidate Name	<div>Category/Type</div>	BOOKKEEPING SERVICE
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
SUBTOTAL of Disbursements This Page (optional)		<div>900.00</div>	
TOTAL This Period (last page this line number only)		<div>22719.13</div>	

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Nebraska Leadership PAC

A. Full Name (Last, First, Middle Initial) Tim Johnson for Senate		Transaction ID: 70711.E166 Date of Disbursement <div> <div>06</div> <div>30</div> <div>2007</div> </div>	
Mailing Address PO Box 1859		Amount of Each Disbursement this Period <div>5000.00</div>	
City Sioux Falls	State SD		Zip Code 57101-1859
Purpose of Disbursement			<div>Category/Type</div>
Candidate Name			<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
B. Full Name (Last, First, Middle Initial) UNO College Democrats		Transaction ID: 70711.E153 Date of Disbursement <div> <div>04</div> <div>22</div> <div>2007</div> </div>	
Mailing Address 6001 Dodge		Amount of Each Disbursement this Period <div>1000.00</div>	
City Omaha	State NE		Zip Code 68182-
Purpose of Disbursement			<div>Category/Type</div>
Candidate Name			<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
C. Full Name (Last, First, Middle Initial) Jack Reed for Senate		Transaction ID: 70711.E165 Date of Disbursement <div> <div>06</div> <div>30</div> <div>2007</div> </div>	
Mailing Address 1000 Chapel View Blvd., Suite 290		Amount of Each Disbursement this Period <div>5000.00</div>	
City Cranston	State RI		Zip Code 02920-
Purpose of Disbursement			<div>Category/Type</div>
Candidate Name			<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			
SUBTOTAL of Disbursements This Page (optional)		<div>11000.00</div>	
TOTAL This Period (last page this line number only)		<div>11000.00</div>	

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Nebraska Leadership PAC

A. Citizens for Beutler Full Name (Last, First, Middle Initial) Mailing Address 3315 M St. City Lincoln State NE Zip Code 68510- Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 70711.E156 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 7 Amount of Each Disbursement this Period 5000.00
B. Jonathan Cook for City Council Full Name (Last, First, Middle Initial) Mailing Address 2701 Stratford Ave. City Lincoln State NE Zip Code 68502- Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 70711.E152 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 2 / 2 0 0 7 Amount of Each Disbursement this Period 500.00
C. Allan Abbott for City Council Full Name (Last, First, Middle Initial) Mailing Address 4516 Fir Hollow Lane City Lincoln State NE Zip Code 68516- Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: 70711.E157 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 7 Amount of Each Disbursement this Period 1000.00
SUBTOTAL of Disbursements This Page (optional) ▶		6500.00
TOTAL This Period (last page this line number only) ▶		

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Nebraska Leadership PAC

A. Full Name (Last, First, Middle Initial)
Annette McRoy for City Council

Mailing Address 3850 Orchard St.

City Lincoln State NE Zip Code 68503-

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Transaction ID: 70711.E158

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

B. Full Name (Last, First, Middle Initial)
Friends of Jim Suttle

Mailing Address 6054 Country Club Oaks Place

City Omaha State NE Zip Code 68152-

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

Category/
Type

Transaction ID: 70711.E168

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

1500.00

TOTAL This Period (last page this line number only)

8000.00